is as under :—

Year	Quantity of fuel wood purchased Qty. (Qtl.)	Amount paid (in lacs)	Amount received from sale fin lacs)
1988-89 .	1,08,435,03	Rs. 72.43	Rs. 55.68
1989-90 .	1,04,461.30	Rs. 66.39	Rs. 50 .62
1990-91 .	80,312.45	Rs. 71.14	Rs. 57.40

Reimbursement of cost of transplant

3550. SHRI JAGDISH PRASAD MATHUR : Will the Minister of HEALTH AND' AMILY WELFARE *be* pleased to state :

(a) whether it is a fact that in case where IOL transplant has been done under medical advice C.G.H.S. is not consistent as to whether cost of the same is reimburseable or not ;

(b) whether there are certain cases in which reimbursement has been permitted under court orders or ministerial discretion ;

(c) if so, what are the details hereof ; and who were the beneficiaries and when the decision was given/implemented ;

(d) what are the reasons for objecting the other such reimbursement cases ; and

(e) if so does it not amount to forcing the people to seek justice from the court? ?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARA DEVI SIDDHARTHA) : (a) Expenditure incurred on IOL transplant is not reimbursable as per CGHS rules.

(b) Yes Sir.

(c) to (e) The details of the cases are reimbursement in connection With IOL transplant waS aceepted as a special case art given below :—

(i) Shri Sharwan Kumar Former Chief Secretary Andhra Pradesh was reimbursed the amount of Rs. 5018/- towards the cost of the operation only. The cost of IOL was not reimbursed in this case.

(ii) Reimbursement of IOL was allowed to Mother of Shri Lal Vijay Pal Singh Hon'ble Member of Parliament. This was allowed i*n* consultation with Department of Pension and Pensioner's Welfare and the payment was made from Service Head in 1987.

(iii) Cost of IOL was reimbursed to Shri D.S. Fauzdar P.S. to Textile Minister in relaxation of rules by Department of Pension and Pensioners Welfare. The payment was made from Service Head in 1987.

(iv) Shri Jaganath Sebai retired P.S. to Ex-President of India was allowed reimbursement of IOL after the case was filed in Central Admini-trative Tribunal in August 1988.

TiKKu Committee Report

3551. SHRI S. S. AHLU-WALIA : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether Government have initiated any action on the imple-

mentation of Tikku Committee report which has the main demand of Service decors through out the country for the implementation of which they had gone on strike recently :

(b) if so what are the details of action taken, in this regard :

(c) whether it is a fact that the recommendations of Tikku Committee and not being implemented by the Government in its totality ;

(d) if so the recommendations which Government do not propose to implement ; and

(e) the reasons for not im plementing the same ?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARA DEVI SIDDHARTHA) : (a) to (e) Government carefully considered the Tikku Committee report and announced its decisions vide memo randum dated 14th November 1991 given in the statement *(see* below). These decisions are being imple-mented . The question of implement -ing the recommendations which are not accepted by the Government dees not arise. However as the Joint Action Council of Service Doctor Organisations continued to agitate even after the announcement of the decisions a Committee of Officers under the Chairmanship of Additional Secretary (Health) was appointed to look into the grievances of all sections of service doctors. The Committee had a series of meeting with the representatives of the Joint Action Council of Service Doctors Organisations the Specialists Associations and Dr. V.P. Malik and others (Petitioners in Writ Petition No. 683/90 in Supreme Court). The Committee has submitted its report on 16th March 1992.

Statement

No. A. 45013/13/90—CHS.V
Government of India
Ministry of Health & F.W.

New Delhi, November 14th, 1991.

OFFICE MEMORANDUM

Subject : Recommendations of the High Power Committee (Tikku Committee service doctors—Decisions thereon.

A Committee has been set up under the Chairmanship of Shri D.K. Tikku, Secretary (Coordination) in the Cabinet Secretariat of the Government of India to look into all aspects of others improvement and cadres reatructur/og of the doctors of the General Health Services The Committee has since submitted its Report. The various recommendations contained in the Report have been carefully considered an/ * he Government of India have taken the following decisions :—

(1) Two additional posts of Additional Directors General of Health Services (Rs. 73CC—7600) shall be created by upgrding two of the existing common Senior Administrative Grade posts (Rs. 5900—6700). Appointment to these additional posts of Additional Director General will be made on the same lines as the existing posts of Additional Directors General.

(2) Four additional posts in the scale of Rs. 7300—7600 shall be operated under Rules 4 (9) of the Central Health Service Rules, 1982, by upgradation of 4 posts in the Supertime scale of Rs. 5900—6700.

(3) 34 additional posts of Director-Professors (Rs. 5900—6700) shall be created in the Teaching Specialists Sub-Cadre of the Central Health Service by upgrading an equivalant number of posts of Professors (Rs. 4500—5700) on floating basis.

(4) 35 additional posts on Consultants (Rs. 5900—6700) shall be created in the Non-teaching Specialists Sub-cadre of the Central Health Service by upgrading an equivalent number of posts of Specialists Grade I (Rs. 4500—5700) on floating basis.

(5) The distinction between the Non Functional Selection Grade (Rs. 4500—5700) and Functional Grade (Rs. 4500—5700) will be eliminated in the Central Health Service. All Associate Professors in Non-Functional SelectionGrade (Rs. 4500—5700) shall be des.gnated as Professors from 1-12-1994. All Specialists Grade II officers (Non-teaching and Public Health Sub-Cadres) in the Non Functional Selection Grade (Rs. 4500—5700) shall be designated as Specialists Grade I *w.e.f.* 1-12-1991.

(6) All Professors (Rs. 4500—5700) and Specialists Grade I Officers (Non teacher and Public Health Sub-cadres) will be eligible for consideration for promotion to the Senior administrative Grade Level posts (Rs. 5900—6700) subject to availability of vacancies, provided they have completed at least 3 years of regular service in the of Rs. 4500—5700 irrespective of whether the said service was performed in the Functional Grade or Non-functional Grade of Rs. 4500—5700. Trie Associate Professors and Specialists Grade II, officers presently in the Non-functional Selection Grade and to be designatedas professors and Specialists Grade I officers respectively from 1-12-1991, shall *en masse* be placed below the existing Professors and Specialists Grade-I officers respectively for the purposes of preparing eligibility lists for consid era-tion for promotion to Senior Administrative Grade level posts (5900—6700).

(7) As in the case of Teaching Sub-cadre, so also in the Sub-cadres of Non-teaching Specialists and Public Health Specialists, the minimum essentia] qualification for recruitment as Specialist Grade II officers (Rs. 3000—5000) shall, *inter-alia,* be a postgraduate degree with three years' experience after obtaining the postgraduate degree or postgraduate diploma with five years experience obtaining the postgraduate diploma All Specialists Grade II officers, recruited in accordance with the modified Recruitment Rules as mentioned above, shall be promoted to the scale of Rs. 3700—5000 on completion of 2 years of service in the scale of Rs. 3000—5000, subject to seniority cum-fitness.

(8) Recruitment to the posts belonging to Super-Specialities, for which the essental minimum qualification is, *inter-alia,* DM or MCH or equivalent., shall be made in the scale of Rs. 3700—5000 in the Teaching/Non-teaching Specialists Sub-cadres.

(9) In all the three Sub-cadres, (Teaching, Non-teaching, end Public Health), officers with 6 years service in the scale of Rs. 3700—5000 or total 8 years service in the scale Rs. 3000—5000 and 3700—5000 shall be placed in the scale of Rs. 4500—5700 according to existing guidelines (which *inter-alia,* provide for overall good performance and at least two "very good" assessment during the precseding 5 years). On such placement in the scale of Rs 4500—5700, the the Associate Professors will stand designated as Professors, and the specialists Grade II officers (Non-teaching and Public Health) shall stand designatecd as Specialists Grade 1 offcers.

(10) The Senior Medical Officers (Rs. 3000—4500) will be promoted as Chief Medical Officers (Rs. 3700-—5000) on completion of six years of regular service as Senior Medical Officers or on completion of ten years of combined regular services as Medical Officers and Senior Medical Officers or which at least two years shall be as Senior Medical Officers on the basis of seniority-cum-fitness subject to their clearing the bench mark of "Good' with no zone of selection and without linkage to vacancies, The promotions shall be *in situ* and personal to the officers promoted. Incidentally, this will provide a second time-bound promotion to General Duty Medical Officers, as the first time-bound promotion from the level of Medical Officers (Rs. 2200— 4000) to the level of Senior Medical Officers (Rs. 3000—4500) on completion of 4 years If service, on seniority-cum-fitness basis has already been implemented. As at present, the placement of Chief Medical Officers in the Grade Rs. 4500—5700 to the extent of 15 per cent of all the senior duty posts of General duty Medical Officers Sub-Cadre, on the basis of the existing guidelines (overall good performance with at least two "Very good" assessment during the preceding 5 years) will continue. Chief Medical Officers in the scale of Rs. 4500—5700 with 3 years service in the scale of Rs. 4500—5700, or total 17 years of Group A service will continue to be eligible for promotion to the Senior Administrative Grade levelposts(Rs. 5900—6700), subject to availability of vacancies.

(11) All the posts occupied by the Medical Officers/Senior Medical Off cere /Chief Medical Officers/Supertime Grade Officers of the General Duty Medical Officers Sub-cadre of the Central Health Service in the various hospitals and teaching another institutions, where the Functions to be performed are predominantly of specialised nature normally required to be performed by Specialist doctors, shall be converted into Specialists posts, which shall be Filled as per the existing provisions in the recruitment rules for Specialists. From the General Duty Medical Officers Sub-cadre, posts equal to the number of Medical Officers/Senior Medical Officers/Chief Medical Officers/Super Time Grade Officers posts that would be converted into Specialists posts shall be abolished The conversion of such posts of the General DutyMedical Officers Sub-cadre in the hospitals and teaching and other institutions to those of Specialists posts will open up opportunities for qualified officers belonging to the General Duty Medical Officers Sub cadre to enter the Specialists Sub-cadres through open competetition.

(12) Direct recruitment at the level of Rs. 4500—5700 as well as Rs. 3700—5000 can be made depending in the identification of the posts.

(13) The benefit of added years of service available under Rule 30 of the Central Civil Services (Pensions) Rules 1972, shall be available for all the members of the Central Health Service.

(14) The feasibility of tranferring any part of the work relating to Cadre Management of the Central Health Service to the Directorate General of Health Services and providing more training facilities to the Member of the Central Health Service shall be examine by the Ministry of Health & Family Welfare.

(15) The Ministry of Railways, the Ministry of Defence and other organisations shall separately process proposals for restructuring the Cadre and providing greater avenues for promotion in the light of decisions taken for the Central Health Service Cadre by the Government.

(16) The question of increasing the age of superannuation for doctors from 58 to 60 years is deferred for more detailed examination by the Department of Personnel & Training regarding its implications and repercussions.

(17) The Department of Personnel & Training (AH India Services Division) shall examine, in due course, the question of formation of an All India Medical and Health Service in consultation with the State Governments.

2. The Government after careful consideration of all aspects have not found it possible to accept other recommendations of the High Powered Committee.

3. The amendments to the Central Health Service Rules, 1982 wherever necessary, consequent upon the above decision, shall issue in due course.

Sd/-(S. HARIHARAN) DY. SECY. TO THE GOVERNMENT OF INDIA

TEL. NO. 301 4495.

Committee for welfare of minorities

3552. SHRI MOHAMMAD AFZAL *lias* MEEM AFZAL : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether there is any committee in his Ministry for monitoring implementation of the 15 point Programme for the welfare of the Minorities ;

(b) if so what are the details thereof ; and

(c) trie number of persons who have been provided with Employment during the past three years under the programme ?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARA DEVI SIDDHARTHA) : (a) No Sir.

(b) Does not arise.

(c) As there is no reservation for minorities no roster is maintained for this purpose.